

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1035 OF 3833

(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

DCCC

Full Name (Last, First, Middle Initial)

A. ACTBLUE PAC

Mailing Address 366 SUMMER ST

City
SOMERVILLEState
MAZip Code
02144-3132FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

CONDUIT TOTAL LISTED IN AGG. FIELD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2382996.38

Date of Receipt

| | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 1 | | | 3 | 1 | | 2 | 0 | 1 | 6 | | |

Transaction ID : VT4C3Q7GWC1E

Amount of Each Receipt this Period

500.00

☒ Memo ItemNOTE: ABOVE CONTRIBUTION EARMARKED
THROUGH THIS ORGANIZATION.

Full Name (Last, First, Middle Initial)

B. RAYMOND C. GIESE

Mailing Address 1817 E HOPI LN

City
MOUNT PROSPECTState
ILZip Code
60056-1917FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

| | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 1 | | | 2 | 1 | | 2 | 0 | 1 | 6 | | |

Transaction ID : VT4C3Q5BV92

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SUSAN GILFILLANMailing Address 378 N TAYLOR AVE
UNIT 2WCity
SAINT LOUISState
MOZip Code
63108-1946FEC ID number of contributing
federal political committee.

C

Name of Employer

WASHINGT UNIV SCHOOL OF MED

Occupation

RESEARCH ASST PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

| | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 1 | | | 1 | 2 | | 2 | 0 | 1 | 6 | | |

Transaction ID : VT4C3Q25P49

Amount of Each Receipt this Period

1000.00

☐ Memo Item* EARMARKED CONTRIBUTION: SEE BELOW
EARMARKED THROUGH ACTBLUE

SUBTOTAL of Receipts This Page (optional)..... ►

1300.00

TOTAL This Period (last page this line number only)..... ►